

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10-609-195

FLING DATE 06-26-03

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		5				
7	1					
8	1					
9	1					
10	1					
11	1					
12		(1)				
13	1					
14		1				
15		(1)				
16		(1)				
17		(1)				
18		(1)				
19		(1)				
20		(1)				
21		(1)				
22		(1)				
23		(1)				
24		(1)				
25		(1)				
26		(1)				
27		(1)				
28		(1)				
29		(1)				
30		(1)				
31		(1)				
32		(1)				
33		(1)				
34		(1)				
35		(1)				
36		(1)				
37		(1)				
38		(1)				
39						
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41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	7					
TOTAL DEP.	35					
TOTAL CLAIMS	42					

	IND		DEP		IND		DEP		IND		DEP	
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP
51												
52												
53												
54												
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100												
TOTAL IND.												
TOTAL DEP.												
TOTAL CLAIMS												